

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	METHOD AND SYSTEM FOR NON- INVASIVE MEASUREMENTS IN A HUMAN BODY
Attorney Docket Number::	KOTLER3
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israelil
Status::	Full Capacity

Given Name::	Ilya
Middle Name::	
Family Name::	FINE
Name Suffix::	
City of Residence::	Rehovot
State or Province of Residence::	
Country of Residence::	Israel
Street of Mailing Address::	59/6 Herzl Street
City of Mailing Address::	Rehovot
State or Province of Mailing Address::	
Country of Mailing Address::	Israel
Postal or Zip Code of Mailing Address::	76540
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israeli
Status::	Full Capacity
Given Name::	Alexander
Middle Name::	
Family Name::	FINAROV
Name Suffix::	
City of Residence::	Rehovot
State or Province of Residence::	
Country of Residence::	Israel
Street of Mailing Address::	1/10 Kovshey Ha-Hermon
City of Mailing Address::	Rehovot
State or Province of Mailing Address::	
Country of Mailing Address::	Israel
Postal or Zip Code of Mailing Address::	76555
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israeli
Status::	Full Capacity
Given Name::	Iosef
Middle Name::	
Family Name::	GANDELMAN

Name Suffix::
 City of Residence:: Ashdod
 State or Province of Residence::
 Country of Residence:: Israel
 Street of Mailing Address:: 22/22 Hatzmaut Street
 City of Mailing Address:: Ashdod
 State or Province of Mailing Address::
 Country of Mailing Address:: Israel
 Postal or Zip Code of Mailing Address:: 77452
 Applicant Authority Type:: Inventor
 Primary Citizenship Country:: Israeli
 Status:: Full Capacity
 Given Name:: Boris
 Middle Name::
 Family Name:: FIKHTE
 Name Suffix::

City of Residence:: Rehovot
 State or Province of Residence::
 Country of Residence:: Israel
 Street of Mailing Address:: 17/6 Miller Avia
 City of Mailing Address:: Rehovot
 State or Province of Mailing Address::
 Country of Mailing Address:: Israel
 Postal or Zip Code of Mailing Address:: 76284

Correspondence Information

Correspondence Customer Number:: 001444

Representative Information

Representative Customer Number:: 001444

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This Application	National Stage of	PCT/IL04/001015	11-04-04
PCT/IL04/001015	Continuation-in-Part of	10/702,044	11-06-03

Foreign Priority Information

Country:: Application Number:: Filing Date:: Priority Claimed::

Assignment Information

Assignee Name:: Orense Ltd.
Street of Mailing Address:: 5 Golda Meir St. 5th Floor Science Park
City of Mailing Address:: Ness Ziona
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 74000